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FAX FILING IN U.S. PATENT & TRADEMARK OFFICEDATE: May 24, 2006

TIME: _____

TO:	Commissioner for Patents	FAX NO.:	571-273-8300
FROM:	Lowell L. Carson	ADMIN. ASST.:	Kathleen Spina
APPLN. NO.:	10/807,065	ATTY. DOCKET NO.:	MATB-405US
TITLE OF APPLN.: STRESSED ORGANIC SEMICONDUCTOR			
FILING DATE:	March 23, 2004	ART UNIT:	2811
FIRST INVENTOR:	Kiyotaka Mori	CONF. NO.:	4072
TITLE OF DOCUMENT (and List of Attachments): Request for Extension of Time			
PTO/SB22; PTO/SB21; PTO-2038			

Total Number of Pages: 4 (including this form)

COMMENTS

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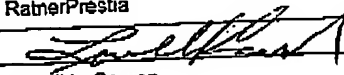
PTO/SB/21 (09-04) (AW 10/2004)

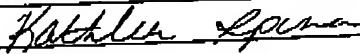
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/807,065	RECEIVED CENTRAL FAX CENTER
	Filing Date	March 23, 2004	
	First Named Inventor	Kiyotaka Mori	MAY 24 2006
	Art Unit	2811	
	Examiner Name	Hu, Shouxiang	
Total Number of Pages in This Submission 4	Attorney Docket No.	MATB-405US	

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): PTO-Fax Cover Sheet, PTO-2038.
Remarks:		
SIGNATURE OF APPLICANT, ATTORNEY OR AGENT		
Firm Name	RatnerPrestia	
Signature		
Printed Name	Lowell L. Carson	
Date	May 24, 2006	Registration No. 48,548

CERTIFICATE OF TRANSMISSION / MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO 571-273-8300 or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.		
Signature		Date
Typed or Printed Name	Kathleen Spina	May 24, 2006

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, ALEXANDRIA, VA 22313-1450.

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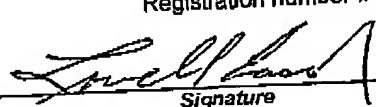
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PTO/SB/22 (10-04) (12-04)

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818))		Docket Number (Optional) MATB-405US	RECEIVED CENTRAL FAX CENTER MAY 24 2006
Application Number 10/807,065		Filed March 23, 2004	
For STRESSED ORGANIC SEMICONDUCTOR		Examiner Hu, Shouxiang	
Art Unit 2811			
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.			
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
		Fee	Small Entity Fee
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))		\$120	\$60 <u>\$120.00</u>
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))		\$450	\$225 \$_____
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))		\$1020	\$510 \$_____
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))		\$1590	\$795 \$_____
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))		\$2160	\$1080 \$_____
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.			
<input type="checkbox"/> A check in the amount of the fee is enclosed.			
<input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.			
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.			
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any additional fees which may be required, or credit any overpayment, to Deposit Account Number <u>18-0350</u> . I have enclosed a duplicate copy of this sheet.			
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.			
I am the <input type="checkbox"/> applicant/inventor.			
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).			
<input checked="" type="checkbox"/> attorney or agent of record. Registration Number: <u>48,548</u> .			
<input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____.			
 Signature		May 24, 2006 Date	
Lowell L. Carson Typed or Printed Name		610-407-0700 Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
<input type="checkbox"/> Total of _____ forms are submitted.			

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